FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

13/1349

OMB AP	PROVAL							
01(0)1	2225 0056							
OMB Number:								
Expires: December 31, 1996								
Estimated averag	ge burden hours							
per response	16.00							
<u>-</u>								
SEC US	E ONLY							
Prefix	Serial							
1	1							
DATE RE	ECEIVED							

Name of Offering ( check if this is an amendment and name has changed, and indicate change.) 11th & Grand Condominiums, Phase II Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 Section 4(6) ☐ ULOE □ Rule 506 n 9 2004 Type of Filing: New Filing Amendment A. BASIC IDENTIFICATION DATA Enter the information requested about the issuer Name of Issuer ( check if this is an amendment and name has changed, and indicate change.) 11th & Grand Investments Phase II, LLC Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) 1211 SW Fifth Avenue, Suite 2250, Portland, OR 97204 (503) 220-2600 Address of Principal Business Operations (Number and Street, City, State, Zip Telephone Number (Including Area Code) Code) (if different from Executive Offices) Brief Description of Business LLC Membership interests to acquire a membership interest in South Park RPO, LLC. South Park intends to fund the pre-development expenses of a 236-unit high-rise condominium building in Los Angeles, California. Type of Business Organization limited partnership, already formed | X corporation other (please specify): business trust limited partnership, to be formed Limited Liability Company Actual or Estimated Date of Incorporation or Organization: Month Year 1 2 ō Actual Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: (CN for Canada; FN for other foreign jurisdiction)

GENERAL INSTRUCTIONS

ederal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation of or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.



OR

State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of a federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

2. Enter the information i					
• Each promoter of	of the issuer, if the	issuer has been organized w	rithin the past five years.	6 10 %	
Each executive	owner naving the p officer and director	ower to vote or dispose, or of corporate issuers and co	direct the vote or disposition reporate general and managing	or, 10% or more	of a class of equity securities of the issuers; and
		of partnership issuers.		.g p	
Ct. 1 D. ()	M 2	M 5 5 10	57 =	Mari	Ma
Check Box(es) that Apply:	□ Promoter	Beneficial Owner	Executive Officer		□ General and/or      ■ Managing Partner
Full Name (Last name first,	if individual)	······································		<del></del>	3-13-13-13-13-13-13-13-13-13-13-13-13-13
ScanlanKemperBard Co	mpanies				
Business or Residence Addre	ess (Number and St	reet, City, State, Zip Code)			
1211 SW Fifth Avenue	•				
Clinate Devices And Annal		D B Call A			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	☐ General and/or  Managing Partner
Full Name (Last name first,	if individual)			-	
Business or Residence Addre	ess (Number and St	reet, City, State, Zip Code)			
	· · · · · · · · · · · · · · · · · · ·	. ,,,,,			
Charle Day (see Alanda)		D D6:-10	Executive Officer	П »:	The Committee of the Co
Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner	Executive Officer	☐ Director	☐ General and/or  Managing Partner
Full Name (Last name first,	if individual)				833
Business or Residence Addre	ss (Number and St	reet, City, State, Zip Code)			
		, , , , , , , , , , , , , , , , , , , ,			
CL II D. ( ) II ( A)				— — — ·	
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ss (Number and St	reet, City, State, Zip Code)			
		, <b>,</b> ,			
61 1 b ( 3 d - 1 d		<u> </u>			Consultant/
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	☐ General and/or  Managing Partner
Full Name (Last name first,	if individual)		<del></del>		
Business or Residence Addre	ss (Number and Str	eet, City, State, Zip Code)			
	(	····, ···, · ···, · ···, · ···,			
CL J. D. C. Mark L. I.			Executive Officer		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	L Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ss (Number and Sn	reet, City, State, Zip Code)			
	(	,,,,,,,			
Cl. 1 D. ( ) d :					
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner

					B. INFOR	MATION ABO	OUT OFFERI	NG				
1.	Has the issuer	sold, or does	s the issuer in	ntend to sell, to	non-accredite	d investors in	this offering?			Yes		No ⊠
				Answ	er also in appe	endix, Column	2, if filing und	ler ULOE.				
2.	What is the m	inimum inves	tment that w	ill be accepted	from any indi-	vidual				\$	<u>o</u>	
										Yes		No
3.	Does the offer	ring permit jo	`⊠									
4.	solicitation of registered with of such a brok	purchasers in the SEC and ker or dealer,	connection d./or with a s	with sales of se tate or states,	curities in the	l be paid or give offering. If a of the broker or broker or dea	person to be li dealer. If mo	sted is an as	sociated per	rson or agent	of a broker	or dealer
	Name (Last nar 1, N. Thoms		•	obert D :	Gooding	Todd M						
	ess or Residen											~ <del>~</del>
1211	. SW Fifth	Avenue, S	uite 2250	•	•							
Name S	e of Associated	Broker or De	ealer									
	s in Which Per	son Listed Ha	s Solicited or	Intends to So	licit Purchaser	<u> </u>						
						•••••			□ All S	tates		
[AL] [ <del>IL</del> ] [ <del>MT</del> ]	[IN]	[ <del>AZ</del> ] [IA] [ <del>NV</del> ]	[AR] [KS] [NH]	[ <del>CA</del> ] [KY] [ <del>NJ</del> ]	[ <del>CO</del> ] [LA] [ <del>NM</del> ]	[ <del>CT</del> ] [ME] [ <del>NY</del> ]	[DE] [ <del>MD</del> ] [ <del>NC</del> ]	[ <del>DC</del> ] [ <del>MA</del> ] [ND]	[ <del>FL</del> ] [MI] [OH]	[GA] [MN] [OK]	[ <del>HI</del> ] [MS] [ <del>OR</del> ]	[ <del>ID</del> ] [MO] [ <del>PA</del> ]
[RI]	[ <del>SC</del> ]	[SD]	[TN]	[ <del>TX</del> ]	[UT]	[VT]	[VA]	[ <del>WA</del> ]	[WV]	[WI]	[ <del>WY</del> ]	[PR]
Wall	Name (Last nar ter, Robert W	•				<del>-</del>						
	ess or Residen SW Fifth Ave				ate, Zip Code)	)						
	of Associated		•	i, OR 7/204								
	rson Securities											
States	in Which Pers (Check "A					s 		•••••	. 🗌 All St	ates		
[AL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[ <del>CA</del> ] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[ <del>OK</del> ]	[OR]	[PA]
[RI]	[ <del>SC</del> ]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
	Name (Last nam on, Robert W.		lividual)									
	ess or Residen				ate, Zip Code)							
	SW Fifth Ave			l, OR 97204								
	rson Securities		zaier									
	in Which Pers	son Listed Ha										
	(Check "A	All States" or	check individ	iual States)	•••••				. All St	ates		
[AL] [HL] [MT]	[AK] [IN] [NE]	[AZ] [IA] [NV]	[AR] [KS] [NH]	[ <del>CA</del> ] [KY] [ <del>NJ</del> ]	[CO] [LA] [NM]	[CT] [ME] [NY]	[DE] [MD] [NC]	[DC] [MA] [ND]	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [ <del>OR</del> ]	[ID] [MO] [PA]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns			
	below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Pri		Amount Alread
	Dobe	<b>c</b>		•
	Debt	<u>\$</u> \$0	_	<u>\$</u> <u>0</u>
	Convertible Securities (including warrants)	\$ 0		\$ 0
	Partnership Interests (LLC Membership Interests)	\$4,183,7		\$ 00,000
	Other (Specify)	\$0		\$
	Total	\$ <u>4,183,75</u>	53	\$ 00,000
	Answer also in Appendix, Column 3, if filing under ULOE			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
		N		Aggregate
		Number Investors		Dollar Amount of Purchases
	Accredited Investors  Non-accredited Investors	0	_	\$ 00,000 \$ 0
	100Factionica in cours		_	ΦΟ
	Total (for filings under Rule 504 only)	<u>N/A</u>	_	\$ <u>N/A</u>
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classecurities by type listed in Part C - Question 1.			
		Type of		Dollar Amount
	Type of Offering	Security		Sold
	Rule 505	N/A	_	\$ N/A
	Regulation A	N/A	_	\$N/A
	Rule 504	N/A	-	\$ <u>N/A</u>
	Total	N/A	-	\$N/A
<b>1</b> .	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate and check the left of the estima	e		
	Transfer Agent's Fees			\$0
	Printing and Engraving Costs			\$0
	Legal Fees			\$
	Accounting Fees			\$ <u>0</u>
	Engineering Fees			\$ 0
	Sales Commissions (specify finders' fees separately) SKB Securities & Kipling Capital		$\boxtimes$	\$73,215
	Other Expenses (identify)			\$ 0
	Other Expenses (identify)		Ø	Φ <u> </u>

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	expenses furnished in response to Part C	te offering price given in response to Part C - Question 1 :  "- Question 4.a.  "ceeds to the issuer."		,5 <u>38</u>
5.	purposes shown. If the amount for any purpose is n	ceeds to the issuer used or proposed to be used for each of not known, furnish an estimate and check the box to the let all the adjusted gross proceeds to the issuer set forth in resp	ft of the	
			Payments to Officers, Directors, & Affiliates	Payments To Others
	Purchase of real estate  Purchase, rental or leasing and installation of machine	nery and equipment	\$ <u> </u>	\$ 0 \$ 0 \$ 0 \$ 0 \$ 0
	Repayment of Indebtedness	nother issuer	\$0 \$0	□ \$ 0 □ \$ 0 □ \$ 0 ⋈ \$ 4,037,323
				□ \$ <u>0</u> ⊠ \$4,037,323
	Total Payments Listed (column totals added)		⊠ <u>s</u>	\$4,110,538
		D. FEDERAL SIGNATURE		
an ı		undersigned duly authorized person. If this notice is filed ties and Exchange Commission, upon written request of its ule 502.		
1 L	ssuer (Print or Type)  1th & Grand Investments Phase II, LC	Signature	) 2/8/2	)Y
	Name of Signer (Printer or Type)  T. Thomson Bard, Jr.	Title of Signer (Print or Type)  Member, ScanlanKemperBard Companies  Operating Manager of 11 <sup>th</sup> & Grand Inve	stments Phase 1	II, LLC

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

# ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE							
1.		(e) or (f) presently subject to any of the disqualification provisions  Yes  No  No						
		See Appendix, Column 5, for state response.						
2.	The undersigned issuer hereby undertakes to furnis at such times as required by state law.	sh to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500)						
3.	The undersigned issuer hereby undertakes to furnis	sh to the state administrators, upon written request, information furnished by the issuer to offerees.						
4.	,	a familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering the is filed and understands that the issuer claiming the availability of this exemption has the burden of the indicated.						
	issuer has read this notification and knows the conte	ents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized						
1: L		Signature Date 12/8/04						
	ame of Signer (Printer or Type)  Thomson Bard, Jr.	Title of Signer (Print or Type)  Member, ScanlanKemperBard Companies  Companies						

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

#### APPENDIX

1		2	3			3		T :	5
	to non-a	to sell ccredited s in State -Item 1)	Type of Security and aggregate offering price offered in state (Part C - Item 1)		Type of investor and amount purchased in State (Part C - Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA		1						Ì	
СО									
CT									
DE	<del> </del>								
DC						<u> </u>			
FL	<del>                                     </del>	1						<del> </del>	
GA							-		
HI									
ID									
IL									
IN									
IA									
KS									
KY									
LA					_				
ME							_		
MD	ļ								
MA	ļ								
MI	ļ						_		
MN									-
MS MO	<del>                                     </del>								
MT	-								<u> </u>
NE					<del></del>				
NV	<del>                                     </del>								
NH	<u> </u>								
NJ	<del>                                     </del>								
NM									
NY	<del>                                     </del>							·	
NC				<del></del>			<u> </u>		
ND		<del> </del>							

ОН					
OK		1	 		
OR					
PA					
RI					
SC					
SD					
TN					
TX					
UT				-	
VT					
VA					
WA			 		
WV					
WI					
WY					
PR					